FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC U	JSE ONLY
Prefix	Serial
1	1
DATE	RECEIVED

OMB APPROVAL

3235-0076

April 30, 2008

137950

Estimated average burden Hours per response: 16.00

☐ Estimated 🕦

OMB Number:

Expires:

Columbus Hill Overseas, I		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	on 4(6) UCCE
Type of Filing: New Filing	Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested abo	ut the issuer	
·—	amendment and name has changed, and indicate change.)	06060292
Columbus Hill Overseas, I	.td	
	and Street, City, State, Zip Code) es (Cayman) Limited, P.O. Box 1234, Queensgate et, Grand Cayman, KY1-1108, Cayman Islands	Telephone Number (Including Area Code) (345) 949-9876
	ns (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business To o	perate as a private investment fund	
Type of Business Organization		
corporation	☐ limited partnership, already formed ☑ oth	er (please specify): exempted company
☐ business trust	limited partnership, to be formed	PROCESSED

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Month

CN for Canada; FN for other foreign jurisdiction)

05

Year

_06

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC II	DENTIFICATION DATA		
2. Enter the information requested for the following:			
o Each promoter of the issuer, if the issuer has been organ	ized within the past five years;		
 Each beneficial owner having the power to vote or disposof the issuer; 	ose, or direct the vote or disposition		
o Each executive officer and director of corporate issuers	and of corporate general and manag	ing partners of part	nership issuers; and
o Each general and managing partner of partnership issued	rs.		
Check Box(es) that Apply: Promoter Beneficial Owne	r Executive Officer	Director	Investment Manager
Full Name (Last name first, if individual) Columbus Hill Capital Management, L.P.			
Business or Residence Address (Number and Street, City, State 830 Morris Turnpike, 2nd Floor, Short Hills, NJ, 0707)			_
Check Box(es) that Apply: Promoter Beneficial Owne	r Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Eng, Kevin D.			
Business or Residence Address (Number and Street, City, State c/o Columbus Hill Capital Management, L.P., 830 Mor	e, Zip Code)	Hills, NJ, 07078	
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Kaminsky, Howard T.			
Business or Residence Address (Number and Street, City, State c/o Columbus Hill Capital Management, L.P., 830 Mo	e, Zip Code) rris Turnpike, 2nd Floor, Short	Hills, NJ, 07078	
Check Box(es) that Apply: Promoter Beneficial Owner		□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Keens, Warren			
Business or Residence Address (Number and Street, City, State c/o P.O. Box 1034 GT, Harbour Place, 4th Floor, 103 South	e, Zip Code) Church Street, Grand Cayman, Ca	yman Islands	
Check Box(es) that Apply: Promoter Beneficial Owner	_	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Martin, Linburgh			
Business or Residence Address (Number and Street, City, State c/o P.O. Box 1034 GT, Harbour Place, 4th Floor, 103 South	e, Zip Code) Church Street, Grand Cayman, Ca	yman Islands	
Check Box(es) that Apply: Promoter Beneficial Own		Director	General and/or Managing Partner
Full Name (Last name first, if individual) Sutlic, John			
Business or Residence Address (Number and Street, City, State c/o P.O. Box 1034 GT, Harbour Place, 4th Floor, 103 South	te, Zip Code) I Church Street, Grand Cayman, Ca	yman Islands	
Check Box(es) that Apply: Promoter Beneficial Own		Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State	te, Zip Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B.	INFORM.	ATION AE	OUT OFF	ERING	·	·		
1.			ld, or does so in Apper					nvestors in	this offering	g?	Yes		
2.								lual			\$ 5	* 000,000	
	* 5	Subject to	the discreti	on of the E	oard of Di	rectors to a	ccept lesser	r amounts.					
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												mmission o	r similar sociated person oi
												. If more th	
													r only. Not
	Applic	able											
Full Nam	ne (Last	t name firs	st, if indivi	lual)									
Business	or Res	idence Ad	dress (Nun	ber and St	reet, City,	State, Zip C	Code)					•	
Name of	Associ	ated Brok	er or Deale	<u></u>	· ·	<u>.</u>				<u></u>			
			sted Has So or check in			olicit Purcl	nasers					□ A1	l States
•					,	4001			a.	/m. 1		_	
	AL] [L]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	(CO) [LA]	(CT) [ME]	(DE) (MD)	[DC]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID]
_	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[ME]	[NC]	[MA] [ND]	[MI] [OH]	[OK]	[OR]	[MO] [PA]
	RIJ	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]
Full Nam	e (Last	name firs	t, if individ	lual)									
Business	or Resi	idence Ad	dress (Num	ber and St	eet, City, S	State, Zip C	ode)	<u> </u>		_		•	
Name of	Associa	ated Broke	er or Dealer	-	•						. <u>-</u>		
			ted Has So or check in			olicit Purch	asers					☐ Al	l States
[A	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
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Full Name	e (Last	name first	, if individ	ual)							_	·	·
Business o	or Resi	dence Ado	dress (Num	ber and Str	eet, City, S	tate, Zip C	ode)		·				
Name of A	Associa	ited Broke	r or Dealer	<u>-</u>									
			ted Has Sol or check in			olicit Purch	asers					□ A1	l States
					•	(00)	COTI	IDE	(DC)	(IP) 3	10.43		
A] []]	.L]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) [MD]	[DC] [MA]	[FL] [Ml]	[GA] [MN]	(HI) [MS]	[ID] [MO]
	-) 1T]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[MO] [PA]
[R		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

\$ Preferred \$ \$ \$ \$ \$200,000,000*	Amount Already Sold \$ \$ \$ \$ \$ \$ \$136,770,000*
\$ Preferred \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$136,770,000*
\$ Preferred \$ \$ \$ \$ \$200,000,000*	\$ \$ \$ \$136,770,000*
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$136,770,000*
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\$ \$200,000,000* \$200,000,000*	\$136,770,000*
\$200,000,000* \$200,000,000*	\$136,770,000*
\$200,000,000*	· · · · · · · · · · · · · · · · · · ·
	\$130,770,000
nder ULOE.	
tors who have purchased securities in this offering and the aggregate 4, indicate the number of persons who have purchased securities and thes. Enter "0" if answer is "none" or "zero."	dollar the
Number Investors	Aggregate Dollar Amount of Purchases
13*	\$136,770,000*
0	\$0
nder ULOE.	\$136,770,000
nuci obob.	
er the information requested for all securities sold by the issuer, to do s prior to the first sale of securities in this offering. Classify securities	ate, in ies by
Type of Security	Dollar Amount Sold
	\$
 -	<u> </u>
	<u> </u>
	e
the issuance and distribution of the securities in this offering. Exclusuer. The information may be given as subject to future contingenci timate and check the box to the left of the estimate.	\$ lude ies. If
the issuance and distribution of the securities in this offering. Exclusiver. The information may be given as subject to future contingencial	lude
the issuance and distribution of the securities in this offering. Exclusiver. The information may be given as subject to future contingencial timate and check the box to the left of the estimate.	lude ies. If
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the issuance and distribution of the securities in this offering. Exclusuer. The information may be given as subject to future contingenci timate and check the box to the left of the estimate.	lude ies. If \$0 \$* \$*
the issuance and distribution of the securities in this offering. Exclusiver. The information may be given as subject to future contingence timate and check the box to the left of the estimate. [X]	lude ies. If \$0 \$* \$*
the issuance and distribution of the securities in this offering. Exclusiver. The information may be given as subject to future contingence timate and check the box to the left of the estimate. [X	\$0
the issuance and distribution of the securities in this offering. suer. The information may be given as subject to future continuimate and check the box to the left of the estimate.	igenci

Total	[X]	\$150,000*
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^{*}All offering and organizational expenses are estimated not to exceed \$150,000*.

C. OFFEI	UNG PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROC	EEDS
	e aggregate offering price given in response to Part C - Question 1 and total Part C - Question 4.a. This difference is the "adjusted gross proceeds to the	\$199,850,000

Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

			Payments to Officers, Directors, & Affiliates			Payments to Others
Salaries and fees	[]	\$]]	\$
Purchase of real estate	[]	\$. []	\$
Purchase, rental or leasing and installation of machinery and equipment	[]	\$. []	\$
Construction or leasing of plant buildings and facilities	1]	\$. []	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[1	\$. []	\$
Repayment of indebtedness	[]	\$. []	\$
Working capital	[]	\$. []	\$
Other (specify): Investment Capital	Į.]	\$. [x }	\$199,850,000
Column Totals	ſ]	\$	•	x]	\$199,850,000
Total Payments Listed (column totals added)			[x]	\$199,	830,00	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Columbus Hill Overseas, Ltd.	Signature Dovid Ambosia	Date October 11, 2006
Name of Signer (Print or Type) By: Columbus Hill Capital Management, L.P., its investment manager	Title of Signer (Print or Type) Managing Director and General Counse	el
By: David W. Ambrosia		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (Sec 18 U.S.C. 10001.)

	. E. ST	ATE SIGNATURE	
۱.	Is any party described in 17 CFR 230.262 presently subject to	any of the disqualification provisions of	Yes No
	See Appendix, Column 5,	for state response. Not applicable	
2.	The undersigned issuer hereby undertakes to furnish to any sta (17 CFR 239.500) at such times as required by state law. Not		this notice is filed, a notice on Form D
3.	The undersigned issuer hereby undertakes to furnish to the sta offerees. Not applicable	ite administrators, upon written request	t, information furnished by the issuer to
4.	The undersigned issuer represents that the issuer is familiar w Offering Exemption (ULOE) of the state in which this noti exemption has the burden of establishing that these conditions	ice is filed and understands that the	
	e issuer has read this notification and knows the contents to dersigned duly authorized person.	be true and has duly caused this no	tice to be signed on its behalf by the
Issi	uer (Print or Type)	Signature	Date
Co	olumbus Hill Overseas, Ltd.	David Ambring	October 11, 2006
Na	me (Print or Type)	Title (Print or Type)	
-	r: Columbus Hill Capital Management, L.P., its vestment manager	Managing Director and Ger	neral Counsel

Instruction:

By: David W. Ambrosia

APPENDIX

	Columbus Hill Overseas, Ltd.										
1	Intend t non-acc invest Sta		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Class A and B Shares	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AK											
AL											
AR											
AZ	<u> </u>										
CA									ļ 		
со	<u> </u>								<u> </u>		
CT	<u></u>					<u></u>	<u> </u>		ļ		
DC	<u> </u>		<u></u>								
DE									 		
FL		х	Class A and B Shares \$7,000,000	1	\$7,000,000	0	\$0				
GA				-	<u> </u>		<u> </u>				
HI	 			· · · · · · · · · · · · · · · · · · ·	<u> </u>		-				
lA				<u> </u>		 		•	-		
ID			:	<u> </u>		-					
1L	-	х	Class A and B Shares \$66,870,000	7	\$66,870,000	0	\$0				
IN											
KS	-										
KY	 				-	<u></u>					
LA											
MA		х	Class A and B Shares \$4,200,000	1	\$4,200,000	0	\$0				
MD											
ME		х	Class A and B Shares	1	\$1,700,000	0	\$0				

APPENDIX

			Co	lumbus Hill	Overseas, Lt	d			<u></u>	
1	2 Intend to sell to		3 Type of security	4					5 Not Applicable Disqualification under State ULOE (if yes, attach	
		non-accredited and aggregate						explanation of		
	invest Sta		offering price offered in state	Type of investor and amount purchased in State					waiver granted)	
	(Part B-		(Part C-Item 1)	(Part C-Item 2)				(Part E-Item 1)		
State	Yes_	No	Class A and B Shares	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
			\$1,700,000				<u> </u>		<u> </u>	
MI			·							
MN							<u> </u>		ļ	
МО							<u> </u>			
MS										
MT										
NC							<u> </u>		<u> </u>	
ND										
NE					<u> </u>					
NH	1							<u></u>		
NJ		х	Class A and B Shares	1	\$50,000,000	0	\$0			
			\$50,000,000		<u> </u>					
NM									 	
NV	1	Ī				<u> </u>			 	
NY									-	
ОН							<u> </u>		<u></u>	
ОК		<u> </u>		ļ			_		<u> </u>	
OR		<u> </u>					<u> </u>		 	
PA		x	Class A and B Shares	2	\$7,000,000	0	\$0			
			\$7,000,000	<u> </u>			 		1	
PR	<u> </u>	ļ	<u> </u>		 		 			
RI	<u> </u>			ļ	<u> </u>		 	-	1	
SC	ļ <u> </u>		<u> </u>	<u> </u>	ļ		 	 -		
SD	<u> </u>	<u> </u>		 			 	 	- 	
TN		ļ	<u> </u>		<u> </u>	<u> </u>		 	 	
TX								 	 	
UT								<u> </u>		

APPENDIX

		-	Co	lumbus Hill	Over <u>seas, L</u>	.td	 		
1	Intend to sell to non-accredited investors in State		Type of security and aggregate offering price offered in state	4 Type of investor and amount purchased in State				5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	(Part B-	No	(Part C-Item 1) Class A and B Shares	Number of Accredited Investors	(Part C-l	Number of Non- Accredited Investors	Amount	Yes	No_
VA	<u> </u>					ļ	<u> </u>	<u> </u>	
VI							ļ		
VT									
WA									
Wl					<u> </u>				
WV	<u> </u>								
WY	<u> </u>								